FEC FORM 3X

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

Rev. 12/2004

. Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. ADDRESS (number and street) Check if different than previously reported. (ACC) FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE A NEW 3. IS THIS AMENDED REPORT OR (N) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) PRE-Election Quarterly Report (Q2) Convention (12C) Report for the: Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day (d) Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of Covering Period through I certify that I have examined this Report and to the test of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer 1 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office FEC FORM 3X Use'

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name ZZ 15 Z1/4 Report Covering the Period: From: **COLUMN A** COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 140x 154 2517 Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicappidate further information contact: Federal Election Commis-999 E Street-Washing* Toll Free 50 Local 202-6

FE6AN026

DETAIL	_ED	SUI	AMN	RY	PA	GE

FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		
EAM AC	1/5/	
Report Covering the Period: From:	7 20 14 To	18 15 ZOH
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)		
(1) 110/11/200 (000 00/100010 / //		
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶		
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶		
12. Transfers From Affiliated/Other		
Party Committees		
13. All Loans Received		
14. Loan Repayments Received	<u></u>	
 Offsets To Operating Expenditures (Refunds, Rebates, etc.) 		
(Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made		
to Federal Candidates and Other.		
Political Committees		
17. Other Federal Receipts		
(Dividends, Interest, etc.)		
(a) Non-Federal Account		
(from Schedule H3)]	
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
	The state of the s	
· · · · · · · · · · · · · · · · · · ·		
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶		

Page 4

	II. Disbursements	COLUMN A	COLUMN B
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating	<u> </u>	
	Expenditures		
	(c) Total Operating Expenditures	Samuel and Albert Development and a section of section	
	(add 21(a)(i), (a)(ii), and (b)) ▶		
22.	Transfers to Affiliated/Other Party		
23.	Contributions to	Luniunu	Lunununul
	Federal Candidates/Committees and Other Political Committees		
24	Independent Expenditures		Linen
	·		
25.	(use Schedule É)		
26.	Loan Repayments Made		
	Loans Made Refunds of Contributions To:		
20.	(a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	(I) Tilo di va Batada		
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶		
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements		
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
-	(ii) "Levin" Share		
•	(b) Federal Election Activity Paid Entirely With Federal Funds		
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	1	1
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))		
. -			
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		
	1011 Life 01)		

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(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A COLUMN B** III. Net Contributions/Operating Ex-Calendar Year-to-Date **Total This Period** penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF
EMIZED'RECEIPTS	for each category of the	(check only one)
,	Detailed Summary Page	13 14 15 16
ny information copied from such Reports and Statements i	may not be sold or used by any pe	
for commercial purposes, other than using the name and	address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
)		
Full Name (Last, First, Middle Initial)		
	•	Date of Receipt
Mailing Address		
0	77. 0. 1.	
City State	Zip Code	
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0.0.01
Name of Employer Occupati	on .	1/1/
Receipt For:	he Versite Detail	- 145 10/29
Primary General Aggrega	te Year-to-Date ▼	, ' /
Other (specify) V		
		##
Full Name (Last, First, Middle Initial)		B. t (B)
Mailing Address	·	Date of Receipt
Maning Address		
City State	Zip Code	
<u> </u>		Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		
Name of Employer Occupati	on	
	te Year-to-Date ▼	
Primary General Other (specify) ▼		1
Carlot (opcony) V		4
Full Name (Last, First, Middle Initial)		
·		Date of Receipt
Mailing Address		Max / Dag / Ababaa
City State	Zip Code	
	·	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		Luarana
Name of Employer Occupati	on	_
Receipt For: Aggrega	te Year-to-Date ▼	
Dimani Consul		1
Primary General Other (specify) ▼		

TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

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1403-130-2322	

SCHEDULE B (FEC Form 3X) PAGE FOR LINE NUMBER: Use separate schedule(s) ITEMIZED' DISBURSEMENTS (check only one) for each category of the 26 21b 23 24 22 Detailed Summary Page 28b 28c 30b 27 28a Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

\setminus	NAME OF COMMITTEE (In Full)			
/.	·			
Α.	Full Name (Last, First, Middle Initial)	Date of Disbursement		
	TY EX 7/14 Thru 10/14=17-26.12	14 M / 10 10 / 17 17 17 17 17 17 17 17 17 17 17 17 17		
	Mailing Address			
	SALVITEATALTHIS SUDMINES I AND CODE TO THE LAND	1 (of 1 oct pd 1/4/14		
	Purpose of Disbursement	Amount or Lach Ulsbursemen Lihis Period		
;	Candidate Name INC/UCING 1415 Callected Type	000		
	Office Sought: House Disbursement For:			
-	- President Other (specify) ▼	er servicus.		
	State: District: Full Name (Last, First, Middle Initial)			
В.		Date of Disbursement		
	Mailing Address	M • M) B • B) Y • Y • Y • Y		
	City State Zip Code			
	Purpose of Disbursement	Amenda (Fact Distance of the Date)		
	Candidate Name Category/	Amount of Each Disbursement this Period		
	Office Sought: House Disbursement For:			
	Senate Primary General President Other (specify) ▼			
.,	State: District:	<u>:</u>		
C.	Full Name (Last, First, Middle Initial)	Date of Disbursement		
J .		Mam / Dap / Andadad		
	Mailing Address	 		
	City State Zip Code			
	Purpose of Disbursement	Amount of Field Birth and a River		
	Candidate Name Category/ Type	Amount of Each Disbursement this Period		
٠,	Office Sought: Disbursement For:			
	Senate Primary General President Other (specify)			
_	State: District:			
۶	UBTOTAL of Disbursements This Page (optional)			
7	TOTAL This Period (last page this line number only)			

DANS, '	Use separate schedule(s) PAGE OF
_	for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (In Full)	
1-1 /), a 1/0/1	1
FAM FAC USA	
LOAN SOURCE Full Name (Last, First, Midelle Initial)	Election:
\ \ /stfley //. /- leve	Primary General
Mailing Address .	Other (specify)
10 Ni Freedward of	19 Suite SA
City 11/50 A// State / 7ZIP C	Code
Original Amount of Loan	To Date Balance Outstanding at Close of This Pe
	000 19000 1
Lucitation Lucit	and his following
TERMS	Tabaset Bats
Date Incurred Date Du	le Interest Rate Secured:
1 LA LS LeL4 LA ZA 1	
List All Endorsers or Guarantors (if any) to Loan Source	
1. Eull Name (Last, First, Middle Initial)	Name of Employer
Lottley W. / render	ac -Set-
Mailing Address	Occupation
10 Meenwood The	Je Mary Invest
	Amount
State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
	July 3
Mailing Address	Occupation
·	
City State ZIP Code	Amount Guaranteed
2,	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
NAME - A FILL -	Occupation
Mailing Address	
Mailing Address	Amount
Mailing Address City State ZIP Code	Amount Guaranteed Outstanding:

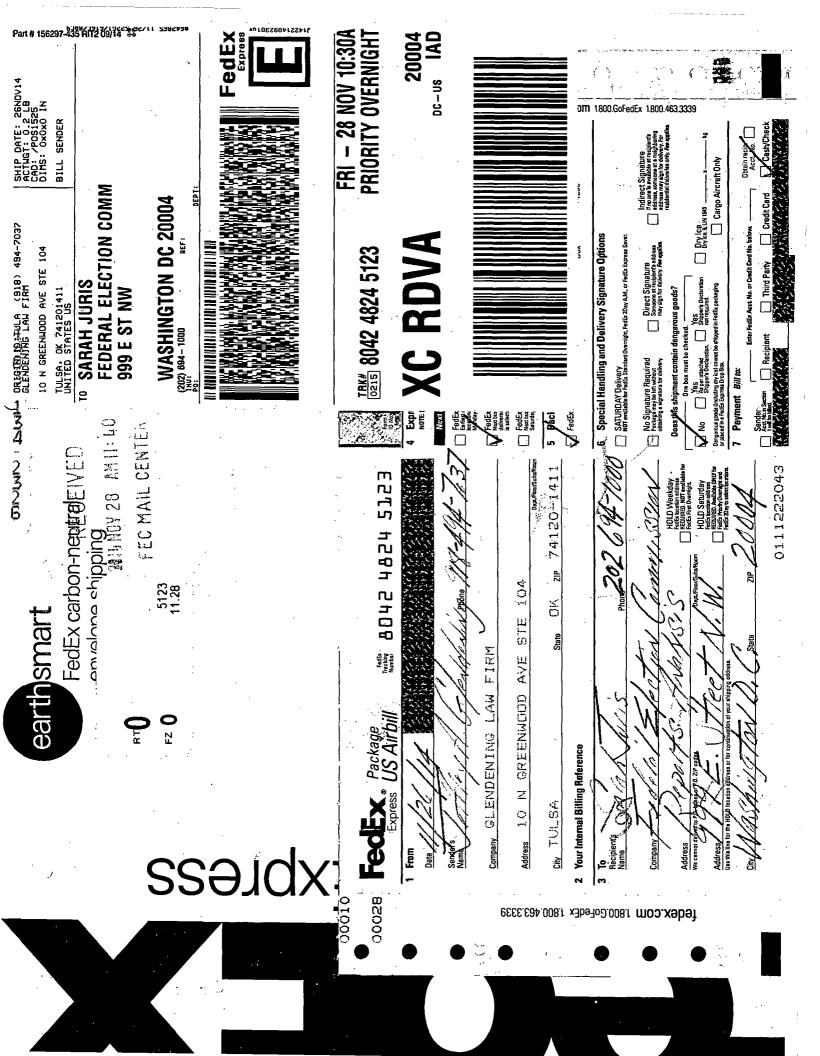
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SCHEDULE C-1 (FEC Form 3X) Supplementary for LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS Information found on Page of Schedule C Federal Election Commission, Washington, D.C. 20463 NAME OF COMMITTEE (In Full) **FEC IDENTIFICATION NUMBER** LENDING INSTITUTION (LENDER) Amount of Loan Interest Rate (APR) Full Name Mailing Address Date Incurred or Established City State Zip Code Date Due A. Has loan been restructured? If yes, date originally incurred B. If line of credit. Total Outstanding Amount of this Draw: Balance: C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) D. Are any of the following pledged as collateral for the loan: real estate, personal What is the value of this collateral? property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? Yes If yes, specify: Does the lender have a perfected security interest in it? No E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? No Yes If yes, specify: Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: City, State, Zip: If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE IREASUR DATE Typed Name Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The Joan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware-of-the requirement that a loan must be made on a basis which assures repayment, and has

	complied with the requirements set forth	11 CEP 100.82 and 100.142 in making	this loan.
ΑU	HORIZED REPRESENTATIVE		DATE
Ту	ped Name / / //	/ondering	1 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping, Date fed Ex Overnight Delivery Service (Specify): 11/26/14 Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED